

BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 0020-5152P

PLEASE NOTE:
YOU MUST
COMPLETE THE
FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

T m: .	BATTERY PROVIDED WITH TE		claimed and for which a pa	atent is sought on the inven	uon entitied:
Insert Title:					-14,45
	the specification of which is attached hereto.	If not attached hereto,			
Fill in Appropriate Information - For Use Without Specification Attached:	the specification was filed on	June 26, 200	03		as
	United States Application Number	·			•
	and amended on				-' hr
	the specification was filed on				
	International Application Number				
	amended on				
	I hereby state that I have reviewed and up any amendment referred to above. I acknowledge the duty to disclose infor §1.56. I do not know and do not believe the sthereof, or patented or described in any print prior to this application, that the same was napplication, that the invention has not been application in any country foreign to the Unimore than twelve months (six months for de on this invention has been filed in any cour representatives or assigns, except as follows. I hereby claim foreign priority benefits or inventor's certificate listed below and have a filing date before that of the application of	ame was ever known on ted publication in any of ot in public use or on satisfactory of the detect of the Unit of the detect of the detect of the detect of the Unit of the detect	I to patentability as defined in used in the United States country before my or our intelled in the United States of A subject of an inventor's centan application filed by mulication, and that no applicated States of America prior States Code, §119 (a)-(d) of any foreign application for	of America before my or on onvention thereof or more the true is a more than one year or trificate issued before the e or my legal representative ation for patent or inventor to this application by me	Regulations, our invention han one year prior to this date of this es or assigns 's certificate or my legal
	Prior Foreign Application(s)			.	~
Insert Priority Information: (if appropriate)	P 2002-188544	Japan	06/27/2002	-	Claimed
	(Number)	(Country)	(Month / Day / Year	Filed)	
	P 2003-051763	Japan	02/27/2003	. 165	No
	(Number)	(Country)	(Month / Day / Year	Filed) Yes	No
	(Number)	(Country)	(Month / Day / Year	Filed) Yes	No
					П
	(Number)	(Country)	(Month / Day / Year)	Filed) Yes	No
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.				
	(Application Number)			(Filing Date)	
	(Application Number)			(Filing Date)	
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:				
Insert Requested Information:	Country	Application Number		Date of Filing (Month	/ Day / Year)
Insert Prior U.S.	I hereby claim the benefit under Title 35, Un insofar as the subject matter of each of the clain the manner provided by the first paragraph which is material to patentability as defined filing date of the prior application and the na	aims of this application in of Title 35, United St in Title 37, Code of F	is not disclosed in the prior ates Code, §112, I acknowledge at Regulations. §1.56	United States and/or PCT ledge the duty to disclose in which became available by	application
Application(s):	(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)		ed)
Page 1 of 2	(Application Number)	(Filing Date)	(Stat	(Status - patented, pending, abandoned)	

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE: YOU MUST

BIRCH, STEWART, KOLASCH & BIRCH, LLP or **CUSTOMER NO.02292** P.O. Box 747 • Falls Church, Virginia 22040-0747

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

COMPLETE THE FOLLOWING: Full Name of First or GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE Sole Inventor: DATE* Insert Name of Inventor Akira KISHIDA July 22,2003 Akira kishida Document is Signed Residence (City, State & Country) CITIZENSHIP Insert Residence Ono-shi, Hyogo, Japan Japan Insert Citizenship MAILING ADDRESS (Complete Street Address including City, State & Country) Insert Mailing 679-47, Tenjin-cho, Ono-shi, Hyogo 675-1316 Japan Address GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE Full Name of Second DATE* Inventor, if any: Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Full Name of Third GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE* see above Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Full Name of Fourth GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE* Inventor, if any see above Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) GIVEN NAME Full Name of Fifth FAMILY NAME INVENTOR'S SIGNATURE DATE* Inventor, if any Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Page 2 of 2 (Revised 01/02) DATE OF SIGNATURE